

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 673275	RECEIPT DATE:	10 / 13 / 00
IA NUMBER:	PCT/ US99 / 08055	IA FILING DATE:	04 / 14 / 99
FAMILY NAME:	VAUDREY	DELAY WAIVED (Y/N):	Y #
GIVEN NAME:	MICHAEL A.	DEMAND RECEIVED (Y/N):	Ny
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	04 / 14 / 98
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	10551/147	COUNTRY:	
CORRESPONDENCE NAME/ADDRESS:		CUSTOMER NUMBER:	000000
		TELEPHONE	2022204200
		FAX	

NAME: KENYON & KENYON

STREET: SUITE 700

1500 K STREET NW

CITY: WASHINGTON

STATE/COUNTRY: DC ZIP: 20005

EMAIL:

APPLICATION TITLES:

USER ADJUSTABLE VOLUME CONTROL THAT ACCOMMODATES HEARING

TAB TO LAST POSITION,PUSH SEND



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
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Bib Data Sheet

SERIAL NUMBER 09/673,275	FILING DATE 10/13/2000 RULE -	CLASS 381	GROUP ART UNIT 2644	ATTORNEY DOCKET NO. 10551/147
APPLICANTS Michael A. Vaudrey, Blacksburg, VA ; William R. Saunders, Blacksburg, VA ; Ronald D. Blum, Roanoke, VA ;				
** CONTINUING DATA ***** THIS APPLICATION IS A 371 OF PCT/US99/08055 04/14/1999 WHICH IS A CIP OF 09/059,303 04/14/1998 WHICH IS A CIP OF 08/907,503 08/08/1997 ABN WHICH IS A CIP OF 09/059,304 04/14/1998 WHICH IS A CIP OF 09/059,307 04/14/1998 ABN WHICH CLAIMS BENEFIT OF 60/109,506 11/23/1998				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 11/29/2000				
** SMALL ENTITY **				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY VA	SHEETS DRAWING 12	TOTAL CLAIMS 12
INDEPENDENT CLAIMS 6				
ADDRESS Ronald E Prass Jr 1500 K Street NW Suite 700 Washington ,DC. 20005				
TITLE User adjustable volume control that accommodates hearing				
FILING FEE RECEIVED 475	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

